IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

P. D'Angio et al.

Serial No.: 10/608,077

Art Unit: 1614

Filed: June 30, 2003

Examiner: To be assigned

For:

PHARMACEUTICAL

COMPOSITIONS AND DOSAGE

Attorney Docket No.: 9516-034-999

FORMS OF THALIDOMIDE

(New Docket No.: 501872-999033)

CORRECTION OF INVENTORSHIP PURSUANT TO 37 C.F.R. § 1.48(a)(2)

Mail Stop Missing Parts Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

An executed Declaration was filed in connection with the above-captioned patent application on February 18, 2004, in response to a Notice to File Missing Parts of Nonprovisional Application dated September 25, 2003.

The inventive entity identified in the Declaration filed on February 18, 2004 was set forth in error, without any deceptive intent. To correct that error, Applicants submit herewith a substitute Declaration and a Statement of John McCarty, who is a co-inventor of the invention recited by the pending claims, pursuant to 37 C.F.R. §1.48(a)(2).

A fee of \$130.00 is believed due for this submission. Please charge this and any other fees required for the entry of this paper and/or to avoid abandonment of this application to Jones Day Deposit Account No. 503013.

Date: March 24, 2004 Respectfully Submitted,

Max Bachrach

(Reg. No. 45,479)

Jones Dav

51 Louisiana Avenue, N.W. Washington, DC 20001-2113

(202) 879-3939

For: Anthony M. Insogna

(Reg. No. 35,203)

Jones Day

12750 High Bluff Drive, Suite 300

San Diego, CA 92130

(858) 314-1200

Enclosures

DCJD: 500682.1



As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. beneath my name.

are listed at 201 et seq. below, of the	ne subject matter which is claime	ed and for which a pate	ent is sought on the i	and joint inventor : invention entitled	f plural names	
PHARMACEUTICAL COMPO	SITIONS AND DOSAGE FOR	RMS OF THALIDON	MIDE			
was filed in the United States Edmonds LLP Docket No. 9516-03	es amendment(s) filed on (ifapplic s on June 30, 2003, was assigned 34-999 and by Jones Day Docker al Application No. on and was and understand the contents of the information known to me to be a sefits under Title 35, United State so identified below any foreign a	d U.S. Patent Applicated No. 501872-999033 amended under PCT Ashe above identified appropriate to patentabilities Code. \$119(a)-(d) of	Article 19 on (if applies plication, including to y as defined in Title	the claims, as ame	nded by any	
EARLIEST FOREIGN	APPLICATION(S), IF ANY, F			F THE APPLICA	ΓΙΟΝ	
APPLICATION NUMBER	COUNTRY		DATE OF FILING (day, month, year)		PRIORITY CLAIMED	
				YES □	№ □	
				YES □	№ 🗆	
I hereby claim the benefit under Tit	ele 35, United States Code, §119	(e) of any United State	es provisional applic	ation(s) listed belo	w.	
PROVISIONAL APPI		FILING DATE				
60/426,016		November 14,	November 14, 2002			
I hereby claim the benefit under Tit matter of each of the claims of this paragraph of Title 35, United States as defined in Title 37, Code of Feder national or PCT international filing	application is not disclosed in the Code §112, I acknowledge the cral Regulations, §1.56 which be	e prior United States a duty to disclose inform	pplication in the ma	nner provided by t	he first	
NON-PROVISIONAL APPLICATION SERIAL NO.	FILING DATE	STATUS				
DICITION SERVED INC.		PATENTED	PENDING	AE	BANDONED	
					•	

for use only when the application is assigned to a company, partnership or other organization.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

			T	MIDDLENIAME	
2 0	FULL NAME	LAST NAME	FIRST NAME	MIDDLE NAME	
	OF INVENTOR	D'ANGIO	Paul	COLD TEN OF CITATIVE	
	RESIDENCE &	CITY Posting Ridge	STATE OR FOREIGN COUNTRY NJ	COUNTRY OF CITIZENSHIP United States	
l	CITIZENSHIP	Basking Ridge	CITY	STATE OR COUNTRY	ZIP CODE
	POST OFFICE ADDRESS	29 Compton Court	Basking Ridge	NJ	07920
		SIGNATURE OF INVENTOR D'ANGIO		3/18/04	
2 0 2	FULL NAME OF INVENTOR	LAST NAME MCCARTY	FIRST NAME John	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Miami Springs	STATE OR FOREIGN COUNTRY FL	COUNTRY OF CITIZENSHIP United States	
٤		STREET	CITY	STATE OR COUNTRY	ZIP CODE
	POST OFFICE ADDRESS	424 Hunting Lodge Drive	Miami Springs	FL	33166
		SIGNATURE OF INVENTOR McCarry	and	3/18/C	9
2 0 3	FULL NAME OF INVENTOR	LOST NAME	FIRST NAME	MIDDLE NAME	,
	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	СІТУ	STATE OR COUNTRY	ZIP CODE
		SIGNATURE OF INVENTOR 203		DATE	
2 0 4	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
•	POST OFFICE ADDRESS	STREET	СПУ	STATE OR COUNTRY	ZIP CODE
	<u> </u>	SIGNATURE OF INVENTOR 204	DATE .		
2 0 5	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
		STREET	CITY	STATE OR COUNTRY	ZIP CODE
5	POST OFFICE ADDRESS				

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COMPOSITIONS AND DOSAGE FORMS OF THALIDOMIDE

STATEMENT PURSUANT TO 37 C.F.R. § 1.48(a)(2)

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

I, JOHN MCCARTY, hereby state that I agree to the change of inventorship requested in the attached Petition, whereby I will be added as a co-inventor of the aboveidentified patent application.

The requested correction is to correct an error in naming inventors that occurred without deceptive intent on my part.

Respectfully submitted,

JOHN MCCARTY

Date: